

BINGHAM McCUTCHEN

RECEIVED
CENTRAL FAX CENTERAUG 02 2004
OFFICIAL

Facsimile

DATE: August 2, 2004

Bingham McCutchen LLP
1900 University Avenue
East Palo Alto, CA
94303-2223650.849.4400
650.849.4800 fax

bingham.com

Boston
Hartford
London
Los Angeles
New York
Orange County
San Francisco
Silicon Valley
Tokyo
Walnut Creek
Washington

	NAME	FAX	PHONE
TO:	Commissioner for Patents	703-872-9306	

FROM:	Antoinette F. Konski antoinette.konski@bingham.com	(650) 849-4800	(650) 849-4950
-------	---	----------------	----------------

PAGES: (INCLUDING THIS COVER PAGE): 2

RE: U.S. Serial No. 09/847,525

MESSAGE:

For transmission problems, please call (650) 849-4825

The information in this transmittal (including attachments, if any) is privileged and confidential and is intended only for the recipient(s) listed above. If you are neither the intended recipient(s) nor a person responsible for the delivery of this transmittal to the intended recipient(s), you are hereby notified that any unauthorized reading, distribution, copying or disclosure of this transmittal is prohibited. If you have received this transmittal in error, please notify us immediately at (same telephone number as in first paragraph - will duplicate) and return the transmittal to the sender. Thank you.

Timekeeper No:	27491	Client/Matter No:	2555557491	DATE/TIME STAMP
Client/Matter Name:				
Return To:		Floor No:	04	

OFFICIAL

AUG 02 2004

PTO/SB/122 (08-03)

Approved for use through 11/30/2005. OMB 0851-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450.	Application Number	09/847,525
	Filing Date	May 1, 2001
	First Named Inventor	Ming CHAN
	Art Unit	1624
	Examiner Name	Mark L. Berch
	Attorney Docket Number	NB 2016.00

Please change the Correspondence Address for the above-identified application to:

☒ Customer Number: 23,639

OR

<input type="checkbox"/> Firm or Individual Name				
Address				
Address				
City		State		ZIP
Country				
Telephone		Fax		

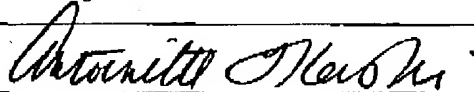
This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

- ☐ Applicant/Inventor.
- ☐ Assignee of record of the entire interest.
Certificate under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).
- ☒ Attorney or agent of record. Registration Number 34,202
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Typed or Printed Name Antoinette F. Konski
 Bingham McCutchen LLP

Signature



Date August 2, 2004

Telephone 650-849-4950

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.